

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101599,293

FILING DATE

9-25-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1		1			52						
3	2			1			53						
4	0			1			54						
5	0		c				55						
6	0						56						
7	0		c				57						
8				1-			58						
9	0			1-			59						
10	0			1-			60						
11	1			1-			61						
12	0			1-			62						
13	1			1-			63						
14	0			1-			64						
15	0			1-			65						
16	0			1-			66						
17	0			1-			67						
18	0			1-			68						
19	1			1-			69						
20	1			1			70						
21	1		c				71						
22	2			1-			72						
23	2			1-			73						
24	0			1-			74						
25	1			0			75						
26	0			1-			76						
27	1			1-			77						
28	1			1-			78						
29	1			1			79						
30	1			1-			80						
31	2			2			81						
32	0			1-			82						
33	1			1-			83						
34	0			1-			84						
35	0			1-			85						
36	0			1-			86						
37	0			1-			87						
38	0			1-			88						
39	1			1			89						
40				1			90						
41	0			1-			91						
42	0			2			92						
43	0			1-			93						
44	0			1-			94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	5		5										
TOTAL DEP.	43	←	37	←		←							
TOTAL CLAIMS	48		42										